

Conflict of Interest

CANDIDATE Statement of Financial Interest

RECEIVED

MAR 11 2022

SD Secretary of a

Deadline to file: Within 15 days after filing nominating petitions (Supreme Court Justice files within 15 days after filing nomination on the retention ballot) or certification of convention nomination.

File with: The SECRETARY OF STATE except local candidates file with the office where they file their nominating petition.

<u>Candidates who file:</u> State and Federal Office candidates (United States Senate, United States House of Representatives, Governor, State Legislator, circuit court judge and Supreme Court Justice <u>SDCL 12-25-28</u>);

Convention Nominee candidates (Lieutenant Governor, state treasurer, attorney general, secretary of state, state auditor, public utilities commissioner, commissioner of school and public lands <u>SDCL 12-25-29</u>);

Convention Nominee candidates of a party with alternative political status (US Senate, US House, Governor, Lieutenant Governor, state treasurer, attorney general, secretary of state, state auditor, public utilities commissioner, commissioner of school and public lands or state legislator SDCL 12-25-29.1); and

Local Office candidates (county commissioner, school board member in a school district with a total enrollment of more than 2,000 students, or commissioner, council member, or mayor in any 1st class municipality SDCL 12-25-30)

Please print: Full Name	weron Nelson		
	21 W 23rd Str	eet, Sionx Fall	s, SD 57105
	umber if applicable) House of		,
What is your occupation/pro	ofession? Philanthro	opy / Developme	nt
List any source of funds (but to your family's (includes specification) includes any enterprise in wh	siness or economic relationship) whit buse, minor children living at home) ich you or an immediate family mem ome from each enterprise but do not	ich contributes more than 10% gross income in the preceding other(s) controls more than 10%	of or more than \$2,000 calendar year. This also of the capital or stock.
	collect specific information, not gene		
Name of Candidate or	Name the Source of Funds		nship to funds

Name of Candidate or Family Member	Name the Source of Funds (Ex: current employer, SD Legislature, 401K, benefits, etc.)	Relationship to funds (Ex: employee, officer, director, associate, partner, shareholder, owner, member, proprietor, etc.)
Kameron Nelson	LifeScape	Employee

I declare and affirm under the penalties of perjury that the information above has been examined by me and to the best of my knowledge and belief is a true, correct and complete representation of myself and my immediate family's financial interests for the preceding catendar year.

(Signature)

(Date)

SOUTH DAKOTA SECRETARY OF STATE • ATTENTION ELECTIONS • 500 E. Capitol Ave. • Pierre, SD 57501